The Canadian Nurse

A MONTHLY JOURNAL FOR THE NURSING PROFESSION IN CANADA

VOL. IV. TORONTO, MAY, 1908. No. 5

THE PATIENT.

Very few people escape being patients during some portion of their lives, and numbers, alas! have passed a large percentage of their days as the centre of interest in a sick room.

A patient has, first and foremost, to submit, as the most skilful doctor, aided by the best of nurses, can do little or nothing with a fractious patient.

The beginning of an illness is perhaps the most trying time to a patient—I mean, of course, in relation to the nurse. The fiat has gone forth, and the patient, especially if it be someone unused to sickness, awaits the dread arrival of the "trained nurse." We who are trained nurses ourselves can realize what this means to a sensitive patient—the introduction of a perfect stranger into the innermost seclusion of the home life, which one does not always want laid bare to other eyes. We cannot, therefore, be too particular in creating a favourable first impression, as it is very often a lasting one.

The new patient, gradually becoming more dependent upon the nurse as the illness takes its course, only fully realizes the boon the nurse has been to her when the days of convalescence have slipped away and the sympathetic presence is withdrawn.

To the patient many of the sensations of every-day life are magnified, and complete dependence, lack of self-control, and nervousness must be "antidoted" (if I may use a new verb) by the nurse's confidence, cheerfulness, and tact. In many cases recovery depends largely upon the nursing—especially is this true in typhoid and all long, tedious diseases. Some nurses scarcely realize the great importance of conscientious nursing in convalescence. At such a time every possible care and precaution should be taken, as the patient's weak condition renders her particularly susceptible to every change. During the period of convalescence it is quite wonderful how much cheer is brought into the sick room by a message from some friend, or a visit and a bit of news, flowers and sunshine being great factors also. A pretty bedroom has a wonderful effect on the mind when one

is recovering from a long illness. How much should a nurse soothe and while away the hours by cheerful reminiscences and happy, healthy-minded conversation. To a mind weakened by disease, the small worries and cares of daily life appear greatly exaggerated, and should, of course, be kept from the sick room. How much more should any exciting or over-stimulating news, however pleasant, be withheld!

The doctor's visit is, of course, the event of the day—the "daily climax," in fact. The patient seems brighter and better and "puts his best foot foremost," so to speak.

The nurse is really a connecting link, and must bear in mind that any criticism made about the doctor in the patient's hearing is very apt to fix an opinion in her mind unless promptly contradicted. One sometimes find very exacting patients who complain of nurse to doctor and doctor to nurse. This state of things cannot be too much deplored, and it should be the nurse's special care and study to remove any lack of confidence in the physician on the part of the patient and establish a perfect relationship between them. If a patient becomes attached to doctor and nurse, half the battle, be it ever so strenuous, is won, and many a great and lasting friendship has been made during the long, quiet days and nights in the sick room.

No two patients are quite alike, and a nurse will have something to learn with each new charge. There is always much room for the exercise of judgment, for while some sufferers expect constant attention, others only wish to be alone. It is not always the sickest people whose demands are the greatest.

It is proverbial that doctors and nurses make the worst patients. They constantly suspect and watch for new symptoms and complications which are not present! "Physician, heal thyself," is a much hackneyed phrase, but I fancy many doctors and nurses have felt a keen desire to say it in sober earnest when attending patients in their own calling.

What a thankful feeling must be in the heart of every nurse when she sees her patient safely on the high-road to health again —one whose feet, perhaps have been very near the narrow river of death!

Thank God that the old days of "Sarah Gamp" are over, and that in her place we have the modern nurse, qualified to be a help to her patient and a credit in word and deed to her training school!

The patient should have the comfortable feeling that she does not even have to think for herself, but that the kind presence presiding in the sick room anticipates her every want and desire.

KATE B. SIMPSON,

Graduate of the Montreal General Hospital Training School for Nurses.

WESTERN HOSPITALS.

Western Hospitals.—What will not these two words conjure up for any woman who has worked in one. The writer's first acquaintance with one began one glorious July night, when she landed in a north-western town which shall for obvious reasons be nameless. The real superintendent was going away for a much-needed rest for three months, and her newly-arrived substitute to confess the honest truth was possessed by a wandering spirit and a desire for adventure.

An inspection of the hospital and its surroundings the next morning proved fairly encouraging. A red brick building built on the neat but not gaudy architectural lines of a wheat elevator—it was evidently a great beginning—but the directors who planned it could hardly have given much thought to the difficulty of carrying stretchers up two long steep flights of stairs. The rooms were high and airy, the ventilation fair, and (saving grace) there was a small diet kitchen on the second floor which saved many trips to the general kitchen in the basement. The operating-room was on the second floor, had a good north light and was fairly well equipped. The plan of the building was as follows: Basement—comprising kitchen and two bedrooms for servants, furnace room and nurses' dining-room. Ground floor—reception room, superintendent's bedroom, drug room, and ward containing five beds. Second floor—diet kitchen, operating room, two private rooms, one semi-private ward, and one ward corresponding in size to the one on the ground floor. Attic—ward containing four beds, and a small bedroom for the orderly. The great fault in construction of this building had been in making it of so great a height in comparison to its width. Better work could have been done by the nurses had the hospital been planned differently. As the building had only recently been completed the grounds had not been laid out at all, but were strewn with building materials. At the back, however, was a large well-stocked kitchen garden, and at the edge of the clearing the wild roses rioted in all their July glory.

The staff consisted of the superintendent, her assistant, who was not a graduate, but had had considerable experience; one nurse in her second year of training and two probationers of a truly verdant greenness. The substitute was much dismayed when she found her assistant was that much-despised personage "an experienced nurse." She imagined a superior sort of Sairey Gamp—she found a middle-aged English lady, who, although she did not pretend to understand modern operating-room technique, was nevertheless a most admirable nurse. In the truest sense she was experienced. Her unfailing kindness, her willingness to tackle any amount of hard work, and, best of all, her quiet cheer-

fulness, were to teach that young and verdant substitute many sorely-needed lessons.

A cook, a ward maid, and a man of all work composed the domestic staff. Laundry work was done by a woman who came in three or four days a week, as necessary.

During the first three weeks of the new regime the work was comparatively light, which gave some opportunity for the study of domestic problems. The superintendent ardently wished that her education had been a little wider in the art of ordering provender for a household. Her ignorance on the subject of "roasts, boils and stews" was truly profound. For the first time she appreciated the jokes in the comic papers regarding the perplexities of young housekeepers. There were several butchers in the town, all of whom (being subscribers to the hospital funds) had to be propitiated by a certain amount of custom. The wise arrangement had therefore been made that they should supply the hospital "month about" with the necessary meat. On the first of the month the wretched substitute forgot this important fact, with the dire result that the rival butcher boys arrived simultaneously at the back door, and, being enemies already, seized the opportunity to engage in Homeric combat! This was the first domestic tragedy, but by no means the last. The cook was really an excellent worker, but in a very short time the grocery man was observed to stay in the kitchen an abnormally long time when he made his morning visits. Next he took to forgetting things, and made excuses to come up at unseemly hours with odd pounds of butter and packages of cornstarch. The cooking began to suffer in an exact ratio to the progress of the love affair. Finally the inevitable happened, "the glory departed," and an era of chance and change began in the kitchen.

By this time the wards were beginning to fill up. New cases of a severe type of typhoid were brought in one after the other. At first most of these came from construction camps in the vicinity and from lonely ranches—these last invariably attributed their illness to drinking slough water. It would be interesting to learn whether this was the source of infection or not. The general character of the outbreak was hardly typical of typhoid in every respect. Nearly all patients exhibited a temperature curve more analogous to that of malaria, severe chills and sweats were an almost constant symptom even in the milder cases. The mortality was high, probably due to the fact that many cases were not brought under treatment until far advanced in the disease. The Mounted Police found several cases on isolated ranches, where there was no woman to tend the poor fellows. A vivid picture still remains of one poor boy brought in for thirty miles in the police wagon, lying on some hay, delirious, unspeakably neglected and filthy. Strange to say he recovered, despite numerous hemorrhages. Too much cannot be said in praise of the Mounted Police

—that they stand for law and order on these lonely prairies everyone knows, but the fact that they also stand for kindness and human charity in their unostentatious way is not so well appreciated.

Accidents in connection with harvesting and threshing operations began to be fairly numerous at this time. The substitute, much to her grave concern, was occasionally called upon to administer anesthetics at emergency operations, where the patient's life hung upon an exceedingly slender thread. This experience was no doubt valuable, but it was paid for by some very anxious hours.

Not until one bears the all-round responsibility of a superintendent in a small hospital does one realize how comparatively small is the load one carries in a large institution where it is shared by so many. Any sudden emergency, such as hemorrhage at night, must be dealt with as best one could, until the doctor could be notified and given time to reach the hospital, which was some distance from the town. This condition of affairs was rendered worse than usual in this particular town, where the medical brethren by no means dwelt together in unity and therefore showed no great alacrity in helping out either their colleagues or the distracted substitute.

Financial responsibility is another important factor. The Board of Directors assumed this to some extent. But it lay in the province of the superintendent to run things on a properly economical basis and still keep up the efficiency of the institution. She was also expected to collect fees from private and semi-private patients. These accounts and those of the domestic department involved a considerable amount of bookkeeping. Hospital supplies are expensive anywhere, still more so in an isolated country town. The substitute had been taught economy by her preceptors in her Alma Mater, but there the supplies came from an unseen vasty storeroom, and, not wasting them in use, that was all one knew about them. But here the problem suddenly became concrete. In one month the cost of these things was borne in upon that substitute's mind in a way that many lectures during training had failed to accomplish.

The Ladies' Aid were responsible for all domestic supplies, such as linen, crockery, etc.—and here is reached yet another problem for young and rather cocksure superintendents. Somebody should really write a little text-book on "How to get on with Ladies' Aids." The terrors of a Board meeting paled into insignificance before the monthly gathering of this august body. Not that they were unkind, far from it. But their feminine eyes found the weak joints in one's armor at once, and they always managed to make tours of inspection on some particularly trying day when the overcrowded wards and the undernursed patients looked worse than usual. Taken singly they were charming—but en masse—well, it must be confessed, they were a thorn in the flesh—or at least, so they seemed to the much-harassed substitute.

For things were getting worse, every day cots and stretchers were crowded wherever there was a place for them, for the epidemic was breaking out in the town itself. There was no time for teaching the poor probationers very much, the work had to be dragged through somehow. At least it was a comfort to feel that the patients could not have been cared for nearly so well in their own homes. The nurses were terribly overworked, but at least they had a good night's rest, as their bedrooms were in a little cottage away from the hospital. This was a luxury unknown to the superintendent, who seldom escaped being called two or three times during the night. It was not possible to obtain a nurse from Winnipeg, as they were kept too busy—it being the typhoid season there—to care to leave town. There was nothing for it but to fight on and make the best of it.

The one redeeming feature was the loyal support given the substitute by her staff. Never will she forget their quiet, uncomplaining industry and good humor. Under the most trying circumstances they made the best of everything, doing the very best they could for their patients and their hospital. It might be mentioned here that two of them subsequently contracted typhoid, and one died from its effects. She was only nineteen years of age, and her loss was a terrible blow to her parents. May the earth lie light above her. She was one of the many martyrs of her profession.

When things were at their very worst the head of affairs contracted typhoid also and was retired from active service, but not from the scene of action. The walls were thin and sound carried easily, so that dire murmurs of tragedies, domestic and otherwise, were easily heard in her sick room. There was plenty to hear, for the epidemic did not abate, and it was two weeks before a nurse was found to substitute for the substitute! The nights were the worst, for then things got very tangled up, and the tired nerves revenged themselves and bred a host of nightmares. Kipling's "Blanche Nuit" best describes these hideous fevered dreams:

"In intolerable stillness,
Rose one little, little star
And it chuckled at my illness
And it mocked me from afar;
And its brethren came and eyed me,
Called the Universe to aid,
Till I lay, with naught to hide me,
'Neath the Scorn of All Things Made."

But all things come to an end at last, and the substitute, very white and shaky and with an insatiable appetite, was able to sit at her window and watch the first snow of the winter whitening the hills. She had plenty of time to meditate on all she had learned.

Especially had she experienced a change of heart regarding country doctors. She in her conceit had secretly despised them because they did not possess the technical knowledge and skill of those who had been her admiration in her hospital days. But she found now that they possessed something far more precious—the spirit of the Great Healer Himself who went about doing good. She saw them returning from long country drives over unspeakable roads, splashed with mud, drenched with rain and sleet, with little sleep and only such rough fare as the ranches and lonely farms afforded them. They went on their daily round quiet and uncomplaining, bringing God only knows what help and comfort to those who needed it sorely. It seemed to her then, as it does still, that the type of woman needed in Western Hospitals is a type that will correspond to the doctors. Not hide-bound routine workers, but women who can make the best of poor equipment, thorough and conscientious, and endowed with a saving sense of humor.

The work is irregular in character, very heavy at certain seasons of the year, and light to the point of monotony at others. It requires great tact to keep all running smoothly, and above all it requires a great capacity for silence, for small towns are proverbially prone to gossip and the "horrors" at the hospital supply interesting material for thrilling tales.

Of the usefulness of these institutions there can be no question. They are doing a great work in a quiet and unostentatious way, and the writer is glad to have had her small part in such honorable work, even though she paid rather dearly for it. The great fault in administration of this particular institution was in employing no other graduate nurses beside the superintendent. It is not possible for the superintendent, over-burdened as she is with detail, to give proper instruction to probationers, even supposing there were sufficient clinical material, which eighteen beds could scarcely be said to afford. The absence of adequate assistance made the superintendent's responsibility greater than it should have been, and really added to the expense, for graduate nurses would have made up the difference in salaries paid them by economy in time and materials.

Any woman contemplating work in a small Western hospital should have a good domestic training; this is absolutely essential, for the domestic economy of the place will be her particular care. Thorough operating-room training is also necessary, and she should have a fair knowledge of the administration of anesthetics and of elementary drug dispensing. Thus equipped, and with a personality that commands respect and liking, she will find a fruitful field for her energies on our Prairies of the "Last West."

E. Incledon Johns,

W. G. H. ('02).

Winnipeg.

DIET FOR THE SICK.

Febrile diseases require some form of diet that will not overtax the weakened digestive organs. Liquid diet is favored as being more easily assimilated, and because a patient can more readily receive a sufficient amount of nourishment in this form. In fever the free use of water is desirable, because the bodily fluids are rapidly reduced, and fluid must be supplied not only to relieve thirst, but to increase volume of blood, and because it exerts a beneficial effect upon the organs of elimination, assisting them to throw off the poison that is apt to accumulate in the system. Plain cold water may generally be given *ad libitum*, but, besides this, it is frequently desirable to use one or more of the numerous beverages which can be prepared to serve the purpose of supplying fluid and at the same time supply nourishment, stimulation or refreshment.

The most nutritious drinks include milk, cocoa, buttermilk, beef tea, meat broths, barley water, rice water, oatmeal water, and toast water. Egg-nog, milk punch, etc., are stimulating as well as nutritious. Tea and coffee are stimulants, and, as a general rule, are not freely given as invalid beverages. Lemonade, orangeade, and other fruit waters are cooling and refreshing.

Light or semi-solid diet includes gruels, thickened broths, cereals, eggs, milk toast, custards, junkets, creams, and light desserts made of rice, tapioca, cornstarch, sago, etc. Milk contains all the necessary elements of nutrition, and is generally the food most relied upon whenever a liquid diet is required. But the stomach may not tolerate an exclusive milk diet given steadily for any length of time, and it is advisable to vary it somewhat. Buttermilk can often be given when the palate rebels against plain milk, or in such cases the milk can often be taken in the form of koumyss. The monotony of an all milk diet may also be varied by flavoring the milk in different ways. Whiskey, brandy, sherry, coffee, vanilla, beef extract, malt extract, and common salt are all used for this purpose. The addition of a little salt is said to favor digestion.

Broths and soups furnish a nutritive and stimulating liquid diet. Where a patient is confined to strictly liquid diet they must always be strained before serving. The best broths and soups are made by using both bone and flesh. The essential point is to draw off all the nutritive juices. The best result is obtained by cutting the meat into small pieces (the fat and skin having first been removed), and allowing one pound of meat or fowl to one pint of cold water. Boil gently until tender or until meat drops from bones. Strain and let cool. When cold remove all fat and warm up as wanted.

Beef Tea.—To one pint of cold water add one pound of chopped lean beef; let stand two hours; simmer on stove three hours, but

do not boil. Add cold water to make up for water lost, so that a pint of beef tea represents one pound of beef. Press beef carefully and strain. Remove any fat, season and serve hot.

Expressed Beef Juice.—Cut a thick juicy steak into small squares; broil over a hot fire until heated through (about one and a half minutes on each side); press out juice with a hot lemon squeezer; season to suit, and serve hot.

Koumyss.—Take an ordinary beer bottle and put into it one pint of milk, one-sixth cake of Fleischmann's yeast, or one tablespoon of brewer's yeast and one-half tablespoon of white sugar reduced to syrup; shake thoroughly, cork well, and allow to stand in refrigerator two or three days, when it will likely be ready for use. A quantity may be prepared at one time, and by laying bottles on side after contents are ready for use it will keep for a long time. Unless patent stoppers are available, the corks must be well tied down. To wire them down securely and then draw off contents with a champagne tap is a satisfactory method.

Junket.—This is easily digested, nutritious and palatable, also very easily prepared. Take half a pint of fresh milk, heated lukewarm; add one teaspoon essence of pepsin, and stir just enough to mix. Pour into cups; let stand until firm. Serve plain or with sugar and grated nutmeg. Junket tablets may be used instead of pepsin.

Milk Toast.—Place a slice of toast upon a hot plate and pour over it a small cupful of hot milk seasoned with a little salt—toast should be made of bread that is at least one or two days old.

Creamed Toast.—Heat one cupful of rich milk; dip a slice of toast into milk and place toast on hot plate. To milk add two teaspoonfuls of flour or cornstarch thickening, piece of butter and pinch of salt, or it may be sweetened, if preferred. Cook to consistency of thick cream; pour over toast, and serve.

Toast Water.—Pour one quart of boiling water over three slices of dark brown toast, broken up. Cover; let stand one hour and strain. Toast water is often found very beneficial in cases of extreme nausea.

Eggs.—The egg is a perfect food, and, when properly served, easy of appropriation by the system. Raw eggs are the easiest digested. The white or albumen portion of egg may be given to very sick patients when yolks are prohibited. In cooking eggs boiling is considered the best method and poaching the next best. By whatever method they are cooked the yolk should be left soft and the whites only coagulated.

White Custard.—Beat white of one egg until very light; add one tablespoonful of sugar and a pinch of salt, and gradually pour on one-half cup of milk. Flavor with any preferred extract and bake in a cup set in a pan two-thirds full of cold water. Have slow oven and bake only until well set. If allowed to bake too long custard will become tough, curdled and indigestible.

GRUELS.—Gruels are made from oatmeal, flour, cornmeal, arrowroot and crackers. They should be well cooked, creamy, smooth and thin enough to pour from feeding cup. Oatmeal and cornmeal gruels are valuable in cases of constipation, but, being heat-producing, are not favored in fevers or inflammatory conditions. Arrowroot gruel is a valuable food, being more easily digested than other starchy foods. In gastric derangements it is especially beneficial.

In relaxed condition of bowels barley water is useful as a nourishment.

A. E. HUTCHISON.

Orillia.

MAY IN NEWFOUNDLAND.

Can it really be the fourteenth of May, with several feet of snow around us, ice in the harbor nearly three feet thick, snowstorms and a cold north-west wind blowing? Yes, spring is here, for have not the snow-buntings arrived and furnished a dainty dish for our table? They are the first to come, others have followed, and when it is warmer we shall awake one morning to hear the woods at the back of the hospital filled with the song of birds.

We are hourly expecting the first mail boat, which brings us into a closer touch with the outside world again. Then we must say "good-bye" to winter. We have not had the rush of work of last year, yet there has been plenty to do. We have had three boys in all the winter. One, a bright little fellow in the "Caro Cot," who suffered from hemorrhage from the lungs several times last winter, and was considered too ill to be removed to the hospital then he has been kept out of doors a great deal, and has reluctantly gone home apparently quite well.

The second boy had tubercular peritonitis. At one time it was feared he would not recover; however, he got quite well, and the last we heard of him was that he was away in the woods, getting wood and shooting birds. The third is a lame boy, with dislocation of the hip. He has got quite fat, and has been learning carpentry and attending night school. He will go home when the boat comes—a better and a more useful member of his family. Many others have come and gone, all benefited by their stay with us.

In the "Cot of the Good Shepherd" is a little girl suffering from scurvy; and in the next cot, "In memory of Mrs. Alexander Ross," lies her mother, suffering from the same poverty disease. The child has a beautifully dressed doll, sent by some wealthy friends, the price of which would have bought them more than one barrel of flour. This poor woman amused me very much one day by saying, "Dr. Grenfell is a wonderful man, he mended

——— arm for him." "We here'd he was made 'The Ruler of the sea.'" "Oh, no, not that," I said. "Well, that's what we here'd, and we here'd he was made next to the King." I explained to her what was the honor as good as being "Ruler of the sea."

Up to the present we have had forty in-patients and no deaths. During Dr. Stewart's absence, we took in a woman with a very bad poisoned hand; two incisions were made and drainage tubes put in. A young man with a badly cut knee was also taken in.

Among the out-patients was a man who wanted to see me. I said, "Well, what is the matter?" He hung his head down and said in deep voice, "Pill." "Yes, but tell me what is the matter." "Pill. Two kinds of pills they told me to get." "What are they for?" "Don't know." "Who are they for?" "My wife." "What is the matter with your wife?" "Got a baby." After this he became more confidential.

One night, just as we were going to bed, some men came from Griquet, twelve miles away, but having to go round a bay instead of across (as the ice was broken up), it made the journey fifteen miles. One man took a burnt piece of rag out of his pocket. It was all that was left of a child's pinafore, who had been badly burnt. "We knew that the Doctor was not at home; but we knew that you would come." It was too dark to go that night. I was up at 5.30 a.m., did the dressings, got the things ready for the burnt child, had breakfast, ordered dinner, and was off at 7.30. The men had ten dogs. After three hours' run we arrived at the house; it was a very small one, with very little in it; a sail hung round the wall to keep the wind and cold from the bed. The poor child lay on a bench near the stove. It appears that she was lighting the fire, when a piece of shaving fell on her pinafore, which immediately caught fire. She ran out to grandmother's house, where her mother had gone to look after the old woman, who was ill. I dressed her fearful burns, and gave her a stimulant, but felt she would not live long.

I then went on to our friend Mr. Alcock for dinner. While here a man came from Quirpon, three miles away, for me to go and see his wife who had been ill for a long time. Immediately after dinner I went with the man. It was a glorious day, and so warm; the sun had made the snow soft for the going, and it was hard work for the dogs—there were only five of them. The man had to run and walk all the way; he got so hot, I felt quite sorry for him.

The poor woman was expecting at a future date her eleventh child, she was very ill, and could never get better there with the house full of noisy children, or without medical aid. I did what I could for her, and told her she must come to the hospital. She said she could not come because she had not a change of clothes to come in. I said, "Well, you are just the very one the hospital is for; so come along as soon as you can. I shall look out for you."

I left her with the promise that she would come. (She has since come, but is still very ill.)

I got back to Griquet about 5 p.m., then went to see the little burnt child. She died shortly after. The little room was full of people. By this time another message had come from another place, five miles away, for me to go and see another woman, but as it was getting late in the evening I decided to stay at Mr. Alcock's house for the night. The following morning I left about eight o'clock for French Beach. I found the woman suffering from congestion of the liver. Having no medicine suitable with me, I promised to send some by the men who were taking me home.

Then the man of the house said to me, "I want you to come to the next house to see a man with a bad foot, which he cut with an axe some time ago. I want to know if I am doing the right thing for it. So off I went. The man was seated on a bench, with his foot resting upon it. I asked what he had been doing to it. He said, "Well, first of all it bled quite a lot. I tied it above the ankle, and after a spell it stopped bleeding. Then I sewed it together and put on it some turpentine, sugar, cream and carbolic acid, all mixed together. After a spell it all fell abroad, and we took out the stitches, for it was no use leaving them in on one side of the wound. Then the foot dropped, so I got a strap and buckled it round the foot and that brought the wound together again, but not so close as when I put the stitches in." I left some ointment I had with me, and then started for home. In doing all this, one experiences deeply the joy of service. I have travelled one hundred miles this winter by dogs and komatik. I rejoice in the opportunity given to do something for these sick ones. There are many other things to interest here. The cows; a pony which, when it first came, the children thought it must be a reindeer. Some pigeons are breeding very quickly; they have even been breeding through the winter, much to our astonishment. The dogs, which in themselves are a great source of interest, and the foxes. One day when I was at the fox farm I saw the white tail of a fox lying on the ground. Alas! a crime had been committed by the pretty little white foxes; they had killed and eaten a brother or a sister. For the first time I have been trying my hand at photography. I particularly wanted to get a good photo of the foxes. One day I stood for more than an hour, trying to get a snapshot of a red fox, which would come peeping out of his hole; but he would not keep still a moment, his head was in all directions. At last—click. When the negative was developed, I found a picture of the run and, at the bottom of the plate, part of the head of the fox.

My Mother's Meeting has been well attended through the winter, and we have spent many a happy afternoon.

Miss Mayou, the Sister for Harrington Hospital, has done much appreciated service, in helping with operations, night nurs-

ing, teaching sewing to the school children, basket making, and night school; while Miss Storr has had charge of the weaving, and a Bible class for women, besides the orphans. Mr. Cushing has been working hard all through the winter. I think the greatest thing he has done is to get a good water supply of spring water right under the hospital, thus saving a great amount of labor. It is pumped up to a cistern on the top of the house, and then comes down to a boiler behind the kitchen stove. He has also devised a plan so that the man pumping can tell when the cistern is full, without having to go to the top of the house. Last winter it would often overflow, and flood the doctor's bed, and two rooms, before the one pumping would think of going upstairs to see how full it was. All the spring cleaning is done. The men's ward has been covered with American oilcloth, and panels are formed with strips of wood, painted in two shades of green. The hall has a new dado of polished pitch pine, and new linoleum for stairs and hall. The kitchen has been painted, and linoleum put down.

When Dr. Grenfel was at his mill last fall, a young man came to see him because of his deafness. He was very dirty, and badly clothed. The Doctor gave orders that he should come to the hospital in the spring. Then first, he was to have a bath; second, to be clothed; third, made to work. He has come—orders have been carried out. We could not understand why he worked without a coat on; yet at the same time he wore a pair of cuffs (gloves with no fingers); he even wore them indoors. At last he was asked why he wore them, and he said "his bed was so clean, he was afraid of making it dirty!" Evidently the cleanliness of the place has made a great impression upon him.

Since writing the above, the poor woman from Quirpon has received the home call. Her gratitude and thankfulness for what was done for her quite touched us all. If we are blessed with only half the blessings she prayed for us, we shall indeed be blessed. We must see what can be done for the many little children she has left behind. I am sure the One who has the mother in his safe keeping, will find a home for some of these, His little ones.

CECILIA WILLIAMS.

St. Anthony's Hospital, French Shore, Newfoundland.

THE BILL.—If all nurses would be as careful about ordering special articles and appliances for the sickroom as they would be if they themselves were paying the bill, there would be fewer complaints about extravagance in graduate nurses.

THE UNEXPECTED.—The element of unexpectedness enters largely into the pleasures of life. It can be used to excellent advantage in planning the convalescent's meals.

Detroit. C. A. AIKENS

TUBERCULOSIS IN NEWFOUNDLAND.

On Friday, February 28th, a large public meeting was held at St. John's for the purpose of declaring war against tuberculosis in Newfoundland. The chair was taken by the Governor, Sir William MacGregor, M.D., K.C.M.G., C.B., and on the platform were the Roman Catholic Archbishop, the Anglican Bishop, the Chief Justice, clergy of all denominations, medical men and influential citizens.

His Excellency reviewed the history of the science of sanitation from an early date to modern times, showing that the science was an ancient one. He gave some very interesting and alarming statistics. Newfoundland differs from all other civilized countries in the fact that while everywhere else the death rate is diminishing, here it is increasing and consumption is our worst enemy. The number of deaths from this cause has increased 61 per cent. during the last ten years, and one-fifth of the deaths in the Island are due to it. St. John's ought to be one of the healthiest cities in the world. It has a fine situation, pure air from the Atlantic, and a splendid water supply, yet its death rate is alarming.

His Grace the Archbishop, who has always interested himself in matters of public health, was the next speaker. He urged united action, stating his belief that an intelligently organized committee would do much to crush out the Medusa-locked monster which was preying upon the life of our people.

Rightly or wrongly, the introduction of cooking stoves and their substitution for the open fire-places is said to largely account for the increase of consumption. Other speakers followed, and as a result of the meeting an association was formed "to endeavor to check the alarming increase of consumption and generally to improve sanitation."

The officers are: President, The Hon. John Harvey; Vice-Presidents, the Mayor and Dr. Rendell; Secretary-Treasurer, Mr. E. Harvey.

Pamphlets have been circulated by the Government containing valuable information, but it is to the coming generation we must look. It is hard to arouse people of middle age from their indifference and apathy and teach them that it is not "the will of God" that disease should cut down young lives. The teaching of hygiene in the schools is doing much to impress upon the children the importance of fresh air and cleanliness.

E. Southcott.

General Hospital, St. John's, Newfoundland.

Clinical Department

OBSTETRICAL BINDERS.

While there are few nurses who share in the delusion so popular among the laity that the use of the obstetrical binder has any permanent effect in "improving the figure," yet the fact remains that the obstetrical binder, so-called, has still many strong advocates among obstetricians and the medical profession generally. The abdominal binder during the puerperal period is still in vogue, and doubtless will continue to enjoy popularity. In common with other bandages the abdominal binder when rightly applied in obstetrical practice is a good thing. When wrongly applied, it, like other bandages, is not only uncomfortable to the patient, but may be distinctly harmful. There are comparatively few things of which it can be said, in dealing with sickness in any form, that, "If it does no good it will do no harm." A thing that does no good usually does harm.

In active obstetrical practice there are some physicians who advise the use of an abdominal bandage during the last three months of pregnancy, especially in cases of a flabby pendulous abdomen. It not only renders the patient more comfortable, but relieves the "stretched feeling," and acts as a support to the abdominal muscles. It is, however, very necessary to seriously caution the patient not to wear it too tight for the sake of appearances, and at the risk of serious trouble later on. Such a bandage has also been used in cases in which the patient was troubled with intestinal gas during pregnancy.

Regarding the use of the abdominal girdle during the puerperal period, even those who have most vigorously maligned it admit that at least it may aid in preventing hemorrhage during the first forty-eight hours. Inasmuch as the nurse and not the physician will usually have the adjustment of the binder, it is well that she should understand that there are dangers connected with its use. The greatest danger, perhaps, is in the fact that it may be too tight and too high. Because this is so is, however, no reason why a nurse should rush to the other extreme and apply it in a loose, slovenly manner.

The straight obstetrical binder, made of coarse cotton doubled, about half a yard wide and long enough to overlap at least two inches on either side (from a yard and a quarter to a yard and a half is the usual length), and which may be fitted to the patient with safety pins, has proven far more satisfactory than the ready-made "fitted" bandage which, in truth, rarely fitted. At least one and one-half dozen safety pins, medium size, should be in readiness to adjust the bandage. If a bandage is worn constantly

too tight and with a pad underneath it during the time in bed, a backward displacement of the uterus, caused by the pressure, frequently results. A bandage that is too high may interfere with stomach expansion.

In the first two or three days immediately following delivery, the abdominal binder when properly applied may be used to advantage in probably the majority of cases. Very frequently the muscles are greatly exhausted and always there is the "gone feeling," because the intestines, that have been for so long crowded, are suddenly given plenty of room. Where the uterus is flabby and inclined to relax, the pad beneath the binder directly above the fundus helps to prevent relaxation. After the first twenty-four hours, unless there are signs of hemorrhage, the pad may be dispensed with. It should also be removed where "after-pains" are frequent and severe.

The distress occasioned by gas in the intestinal tract during the puerperal period may be greatly relieved by a well-fitting bandage.

Any such bandage should be so adjusted as to come well down over the trochanters and kept there. A bandage that is so badly adjusted that it "rides up," is worse than useless, and adds to a patient's discomfort instead of relieving it.

At the time when the patient gets out of bed she will appreciate a properly adjusted bandage even more than when she is in bed. The abdominal muscles have not fully recovered their strength and tone, and the support of a snug bandage will add greatly to her comfort.

In pinning the bandage begin at the umbilicus and pin down first, and then up, arranging snugly the side gores last. A bandage that is slightly curved in the back will not be as quickly soiled, which is a decided advantage. The binder with the perineal strap is not practical because of the impossibility of keeping the perineal strap from becoming soiled or soaked by the lochial discharge, necessitating the change of the whole binder when the upper part would have remained fit for use much longer. If it is possible, a clean binder every day is desirable, but in this, as in other matters, the nurse must be guided by the circumstances of each patient.

Regarding the use of the breast binder during the puerperal period, the best authorities agree as to its value in preventing sagging and consequent distress, in case of large and pendulous breasts.

When for any reason it becomes necessary to dry up the breasts, the roller bandage with cotton batting underneath for padding, is the one most commonly used. Such a bandage should be of heavy cotton four inches wide, and at least ten yards in length.

Detroit. C. A. Aikens.

THE report presented at the Annual Meeting of the Victorian Order shows a continued growth in the work. During the year 1907 two hospitals have withdrawn from the order, viz., Dauphin, Man., and Pictou, N.S. Three new branches have opened. Hospitals at Melfort, Sask., and New Liskeard, and a district at Brantford, Ont. The number of nurses employed and the amount of work done has materially increased. During 1907 our nurses have cared for 10,753 patients, the district nurses making 68,093 visits, 11,911 of which were night calls; 154 1-2 days of continuous nursing were done, 35 Victorian Order nurses are employed in the hospitals, 46 in our training homes and districts, 33 nurses are undergoing training in the homes or hospitals, making a total serving the Order of 114.

THE increase has been 252 more patients nursed, 15,794 more visits have been made in the districts, 334 more night calls have been attended to.

WE are strengthened by having 8 more Victorian Order nurses; 18 nurses have been admitted to the Order; 10 have resigned, 5 of them to be married, 5 for other causes.

SINCE the beginning of the year two new districts have been opened, one in Fernie, B.C., and another in Stratford, Ont. Reports have come of very satisfactory work begun in these new branches. Revelstoke, B.C., has also begun district work in connection with its hospital, a special nurse having recently gone to do this work, viz., Miss Jessie Swyers, graduate General Hospital, St John's, Newfoundland.

A POST-GRADUATE course in District Nursing will be given in the Home of the Victorian Order of Nurses, Ottawa. Apply to the Chief Lady Superintendent, 578 Somerset Street, Ottawa. Also a post-graduate course, with special instruction in Midwifery given at the cases, by an experienced obstetrical nurse. Apply, The Superintendent, 206 Spadina Avenue, Toronto.

The Guild of Saint Barnabas

"Je le pansay; Dieu le guarit." [I tended him; God healed him.]
—*Ambroise Paré.*

Canadian District

MONTREAL.—St. John Evangelist, first Tuesday, Holy Communion at M.G.H., 6.15 a.m. Second Tuesday, Guild Service or Social Meeting, 4 p.m. Third Tuesday, Guild, Service at St. John's, 8.15 p.m. Last Tuesday, Holy Communion at R.V.H. 6.15 p.m.
District Chaplain—Rev. Arthur French, 153 Mance Street.
District Superior—Miss Stikeman, 216, Drummond Street.

OTTAWA—The Cathedral, First Monday.
Chaplain—Rev. Canon Kitson, the Rectory.
Local Superior—Miss L. C. Wicksteed, 494, Albert Street.

TORONTO—St. James' Cathedral Rectory, last Friday, 8 p.m.
Chaplain—Rev. Canon Edward A. Welch, St. James' Cathedral Rectory.
Local Superior—Mrs. Welch.
Secretary—Miss Maud Roger, 5 Howland Ave.

Miss Florence Nightingale, who has recently had a great honor conferred on her, wrote these words of advice to young women: "I would say to all young ladies who are called to any particular vocation, qualify yourselves for it, as a man does for his work. Don't think you can undertake it otherwise. No one should attempt to teach the Greek language until he is master of the language; and this he can only become by hard study. If you are called to man's work, do not exact a woman's privileges—the privilege of inaccuracy, of weakness. Submit yourselves to the rules of business, as men do, by which alone you can make God's business succeed; for He has never said that He will give His success and His blessing to inefficiency, to sketchy and unfinished work."

May Miss Nightingale yet be spared to the country she has served so well, a living example of strength, courage and self-forgetfulness—a noble type of good heroic womanhood.

My Scallop-Shell of Quiet

GIVE me my scallop-shell of quiet,
My staff of faith to walk upon,
My scrip of joy, immortal diet,
My bottle of salvation,
My gown of glory, hope's true gage;
And thus I'll take my pilgrimage.

Blood must be my body's balmer;
No other balm will there be given;
Whilst my soul like quiet palmer
Travelleth toward the land of Heaven;
. . . . . .
My soul will be a-dry before,
But, after, it will thirst no more.

—Sir Walter Raleigh.

FIGHT ON.

"All saints were not sweet, gentle, and amiable *by nature;* some were, but others were not. St. Francis de Sales, who by nature was very passionate; St. Lewis Bertrand, who by nature was gloomy, dark, hard; St. Jerome, who by nature was very fiery and sarcastic, became so by conquering themselves. Fight, and our Lord will reward you in copious measure."—*Father Wilberforce, in the Catholic Nurses' Magazine.*

THE POWER OF PERSONALITY.

At the memorial service held last year in remembrance of Mrs. Agassiz, the late President of Radcliffe College, men of world-wide fame, President Briggs, of Radcliffe, and President Eliot and Professors Goodwin and Norton, of Harvard, spoke of her and her life. It was not a tale of great achievements in the worldly sense. It was a tale of the influence of personality, the story of a woman with a good mind, who by self-forgetfulness and by making the most of all her opportunities, educational and social, made herself respected and loved and a source of inspiration to all who came in contact with her, a woman of such simple dignity, with such evident sincerity and true refinement, that those who listened to her words were unconsciously drawn to respect her views. All her life she worked for the higher education of women. To her efforts in great part the ultimate growth and prosperity of Radcliffe were due; yet in the review of her life these matters found but scanty mention beside her charm and graciousness, her modest yet courageous following of right, her quiet love of all culture.—*The News Letter.*

The Canadian Nurse

VOL. IV. TORONTO, MAY, 1908. No. 5.

Editorial.

THE MESSAGE FROM H.R.H. PRINCESS CHRISTIAN.

It was with feelings of the greatest gratification and pleasure that the Editorial Board received and presented to our readers, the nurses of Canada, the gracious and kind message from H. R. H. the Princess Christian, which appeared in full in our last issue. The Editorial Board ordered work on the April number to be stopped, and a zinc plate to be prepared, presenting a fac-simile of the official letter from the Director-General of the Army Medical Service. On account of the fact that our forms were closed, it was unfortunately not possible to express editorially in that number, as we have now tried to do, the feelings of gratitude and loyalty with which we received the kind message of Her Royal Highness.

THE EASTER MEETINGS IN TORONTO.

As we go to press, the annual meeting of the Graduate Nurses' Association of Ontario is in session, with every prospect of a good meeting, and the Canadian Hospital Association is just about to convene. We hope to publish full and interesting accounts of both meetings in our next number.

THE INTERNATIONAL CONGRESS ON TUBERCULOSIS.

This, the first International Congress on Tuberculosis, will meet in Washington, September 21st to October 12th, 1908, and will be an epoch-making event. The Secretary-General, Dr. John S. Fulton, of Washington, will shortly send to our readers special information, but we now gladly draw attention to the importance of this event to nurses. No one who can possibly arrange to be present should on any account miss this great opportunity.

Dr. R. W. Philip, of Edinburgh, to whose initiative the trained nurse owes her opportunity to specialize in this line, is coming to America for the Congress and will also visit Canada.

THE BRITISH ASSOCIATION AT WINNIPEG.

It has been known for some time that the meeting of the British Association for 1909 would be held in Canada, and Winnipeg is to be congratulated on being selected as the place of meeting, August 25th to Sept. 1st, 1909.

The Council of the British Association has nominated Professor J. J. Thomson, F.R.S., Cavendish Professor of Experimental Physics in the University of Cambridge, to be President of the meeting. In 1894 Professor Thomson was awarded one of the Royal medals of the Royal Society, and to this was added in 1902 the Hughes Medal, in recognition of his contributions to the advancement of electrical science, especially in connection with the phenomena of electric discharge through rarefied gases. Two years ago he was the recipient of the Nobel Prize for Physics. The Canadian Government will grant $25,000 towards the expenses of the Association's visit to Winnipeg. The City of Winnipeg itself proposes to make a grant of $5,000.

We congratulate the nurses of Winnipeg on this great event before their city. It will be a great meeting.

THE ROMAN RED CROSS ASSOCIATION.

A School for Red Cross Nurses was established in Rome on February 2nd, 1908, and four courses of lectures inaugurated.

1. Anatomy and Physiology.
2. Bacteriology.
3. Operating and Dressing Rooms.
4. Wounds and Fractures in War. First Aid in War and Peace.

These courses will occupy one month each, the Lectures being delivered on Sunday and Thursday at 3 p.m., in the Military Hospital and there will be a final examination. Hitherto there have been no Italian women trained for the nursing of men, but as the appeal of the Italian Government beautifully says:

"Recent wars and public calamities point to us the way to follow in this philanthropic, difficult, and delicate undertaking.

"The example given by many women, and especially by Russian women, on the battlefield of the east, deepens our faith in the hearts of women in the mournful but glorious vicinity of war.

"The episodes in that competition in abnegation, courage, faith, and infinite charity, gave rise to a world-wide hymn of praise to the imperishable glory of the volunteer nurses.
istrations, and in their pain and homesickness could depend on devoted intelligent care, counsel and comfort.

"Our army confides in the affection you nourish for her, and

for the mother country; confides in you, convinced that your loving cares will be the best of medicine.

"Show once again that Italian women, as well as men, know how to suffer and even to die when it be necessary; show that this new army of sisters of charity knows how to attain the same altitude of courage as their sons, husbands, brothers.

"It is in this certainty that our women wish to follow the example given by those of other countries, that the Roman Red Cross Association invites them to follow the courses of instruction in this school.

"The knowledge which you will thus acquire will also render you useful in case of need in your homes; and in observing rules of hygiene."

No woman could read unmoved such a noble appeal. Until wars shall cease (and may God hasten the day), the spirit of Florence Nightingale will still show itself in the lives of military nurses.

FLORENCE NIGHTINGALE.

From the Flagstaff of the Guildhall in London City floated the Red Cross Flag on Monday, March 18th. It was one of the great days of our profession. In the Council Chamber beneath were gathered the authorities of a city which, like Rome of old, is *Imperium in imperio*, to do honor to the founder of the nursing profession, the saviour of the soldier and the succorer of the sick. But she was not there. There stood the Right Honorable the Chamberlain of the city, voicing for the city, the nation, the Empire, and in a true sense for the whole civilized world, their sentiments of admiration, of gratitude, of love, towards the new "Free Sister," and their thankfulness to Almighty God for what she, as leader, has done and inspired others to do. But she was not there. The walls of the stately hall, witnesses of many another ceremony, looked down on the Lord Mayor in robes of State, on the Aldermen in ermine and scarlet, on the Great Seal, the Sword, the Mace, on the representatives of her profession, the Matron-in-Chief of the Army Nursing Service and her assistant, in their brilliant uniforms, and the more sober attire of the hospital and other nursing officials entitled to be present as representatives. It was a noble and memorable occasion, and though great age and failing health prevented her whom they delighted to honor from receiving that honor in person, yet she lives to appreciate it, and to know in what love and esteem she is held by the world.

Sir Joseph Dimsdale, the City Chamberlain, concluded his eloquent address in these words: "Miss Florence Nightingale will live in the hearts of coming generations as an example of true nobility of character, of utter forgetfulness of self. As we contemplate her life we seem to catch the words of the Divine Master,

'I was sick and ye visited Me. Inasmuch as ye have done it to the least of these ye have done it unto Me.'"

Her nephew, Mr. Shore Nightingale, received the certificate and expressed Miss Nightingale's great appreciation of the great honor.

At Miss Nightingale's special request, the usual gold casket was replaced by an oak casket, and the difference in value, a cheque for one hundred guineas, was given to London charities.

The presentation souvenir distributed in the Council Chamber set out the following as the particulars of Miss Nightingale's work and career:

Nursing and Organization in the Crimea and at Scutari, 1854, 1855, 1856.

National Testimonial, known as the "Nightingale Fund," 1856.

Royal Commission on the Sanitary State of the Army, 1857.

Female Nursing and Organization in the British Army, 1858.

Sanitary Conditions of Hospitals and Hospital Construction, 1858.

"Notes on Nursing," published about 1859.

St. Thomas' Hospital Training School for Nurses, established by the Nightingale Fund, 1860.

Sanitary State of the Army in India, 1863.

District Nursing and Workhouse Infirmaries, 1876.

The following is the official description of the casket: An oak box, with bronze ornamentation of oak leaves, indicative of "Endurance," enriched with a beautifully modelled figure representing "Charity." The lid carries a laurel wreath, with the recipient's monogram in enamels and a scroll with an inscription referring to Miss Nightingale's generosity in establishing the Nightingale Homes at St. Thomas' and King's College Hospitals with the £50,000 granted to her by Parliament for her services during the war, also the date of the commencement of her labors in the Crimea and her return from Scutari. On the front of the box are depicted the full arms and supporters of the City of London in bronze and enamels, with two finely modelled soldiers representing the infantry and cavalry regiments of the time of the Crimea. The reverse side has an ornamental panel containing the following inscription:

PRESENTED
By the CORPORATION of the CITY OF LONDON
With Copy of RESOLUTION,
Granting the HONORARY FREEDOM of the CITY
to
MISS FLORENCE NIGHTINGALE.
March 16, 1908.

The side panels carry modelled lions' heads as handles for the box. The casket has been specially designed and executed by Messrs. Skinner & Co., Court and Civic Goldsmiths, 5 and 6 Orchard Street, W.

Editorial Notes.

GREECE.

The Children's Hospital. — The Superintendent of the Children's Hospital established by the Crown Princess of Greece is Miss Klomare, a Greek lady who was trained in the Massachusetts General Hospital at Boston, and who has been endeavoring to found a training school in connection with the hospital. Two of the nurses have recently been sent to America, where they first of all spent six months in studying English, then took the regular course of training at the New England Baptist Hospital, a post-graduate course of three months at the Massachusetts General Hospital, and of six months at the Boston Lying-in Hospital. Since their return to Greece they have been appointed to the staff of the Royal Children's Hospital.

ENGLAND.

An Informal Royal Visit.—The Princess of Wales, attended by Lady Mary Forbes-Trefusis, made an informal inspection of the Grosvenor Hospital for Women and Children in London. The hospital officials were in attendance, and Her Royal Highness expressed to them her approval and pleasure in what she had seen.

AUSTRALIA

The Matrons' Examination.—One of the candidates at the recent examinations for matrons, Miss Groves, who has just been appointed Matron at the Mildura Hospital, applied for permission to write on the examination at Mildura, as she could not present herself at Melbourne. This new and interesting point was decided in her favor and a fee is to be charged to cover additional expense.

GREAT BRITAIN.

Conference of Matrons at the War Office. — It is intended shortly to have a conference of the matrons of the leading hospitals, to discuss schemes of nursing in connection with the new Territorial System of the Army.

Infantile Mortality. — At Caxton Hall, Westminster, on March 24th and 25th, the Second Annual Meeting of the National Conference on Infantile Mortality was held. The first meeting, which was held last year, gave such an impetus to this question that it marked an epoch in the history of public health in England. We await with great interest the publication of the Official

Report of the Conference. Mr. J. J. McKenzie, of the Glasgow Town Clerk's Department, is the Secretary of the Conference.

The Nurses Registration Bill.—But little progress has been made yet in regard to the three bills before the House of Commons. The "Real Bill" has many powerful friends in the House, but it has some enemies.

INDIA

Lady Minto's Indian Nursing Association.—Her Excellency the Countess of Minto presided at the Annual Meeting of this Association, which took place at Government House, Calcutta. The Association was formed to meet the urgent need for some organization to supply trained nurses for India, the late Lady Curzon being the first President. The report of the Chief Lady Superintendent, Mrs. Davies, showed satisfactory and encouraging progress all along the line. Thirty new nurses have been appointed during the year.

GERMANY

Jubilee of the German Nurses' Association.—Our German sisters kept a great Jubilee, two hundred members or more being present. The festivities were of a charming character. Frau Praetorius made a beautiful address, and "every year again" was the wish expressed by all. From 30 members the Association has grown to 1,800 members, 1,600 of whom are nurses. The "Journal" has an income of about $1,000, and had a credit balance of about $90 last year. Sister Agnes Karll concludes her report of the Jubilee for the *British Journal of Nursing* in these words: "So you see life is worth while, sharp as the battle may be, and should it cost my life, I know what I pay for."

UNITED STATES

The Associated Alumnae.—The Eleventh Annual Meeting of the Nurses' Associated Alumnae will be held in San Francisco, May 5 to 8. The meetings will be held in Golden Gate Hall, on Sutter Street, and the headquarters will be the St. Francis Hotel. Some of the topics to be presented are: "The Nurse in Preventive Medicine," "The Nurse in the Public Schools," "Children's Clinics," "Tuberculosis," "The Curriculum," "Nursing the Insane as Part of a Three Years' Course," "Home Life of the Pupil Nurse," "Clubhouses and Registries," "The Question of Nurses' Charges," "The Responsibilities of the Private Duty Nurse in the Associations." The Inter-State Secretary's report will be heard on the last day; also papers on "Progress of Registration in Foreign Lands," "The Effect of Registration in the Profession and on the Individual," "Difficulties of Examining Boards" and "Work of the State Associations After Registration Has Been Secured."

Notes from New York.—Our readers will hear with delight the good news that Miss M. Adelaide Nutting is really coming to

Toronto in September to address the meeting of the Canadian Hospital Association. Miss Nutting will receive the warmest of welcomes in Toronto.

—Great regret is felt at the illness of Miss Rykert, Superintendent of the Post-Graduate Hospital. Miss Rykert, we are glad to say, is recovering satisfactorily.

—Miss Samuel, at the Roosevelt Hospital, has always some Canadian nurses. They are enthusiastic in their loyalty to this fine hospital and its kind and able superintendent.

—The Babies' Hospital is one of the nicest places THE CANADIAN NURSE ever saw, and Miss Mary A. Smith, the Superintendent, always has so many new, useful, up-to-date things for one to see and learn.

—The New York Hospital, St. Luke's, and the Presbyterian, as well as the beautiful Mount Sinai, continue to flourish, but as in days of yore, there is nothing better than Bellevue, where Miss Goodrich's influence and great organizing ability are already beginning to do great things.

Official Department.

THE CANADIAN NURSE has the honor of publishing official information from

Queen Alexandra's Imperial Military Nursing Service.
The Canadian Permanent Army Medical Service (Nursing Branch).
The Canadian Society of Superintendents of Training Schools for Nurses.
The Association of Hospital Superintendents of Canada.
The Canadian Nurses' Association.
The Manitoba Association of Graduate Nurses.
The Graduate Nurses' Association of Ontario.
The Victorian Order of Nurses.
The Guild of St. Barnabas for Nurses.
The Collingwood G. and M. Hospital Alumnæ Association.
The Calgary Graduate Nurses' Association.
The Edmonton Graduate Nurses' Association.
The Ottawa Graduate Nurses' Association.
The Fergus Royal Alexandra Hospital Alumnæ Association.
The Galt General Hospital Alumnæ Association.
The Guelph General Hospital Alumnæ Association.
The London Victoria Hospital Alumnæ Association.
The Kingston General Hospital Alumnæ Association.
The Montreal General Hospital Alumnæ Association.
The Montreal Royal Victoria Hospital Alumnæ Association.
The Ottawa Lady Stanley Institute Alumnæ Association.

The St. Catharines General and Marine Hospital Alumnæ Association.
The Toronto Central Registry of Nurses.
The Toronto General Hospital Alumnæ Association.
The Toronto Grace Hospital Alumnæ Association.
The Toronto Graduate Nurses' Club.
The Toronto Hospital for Sick Children Alumnæ Association.
The Toronto Riverdale Isolation Hospital Alumnæ Association.
The Toronto St. Michael's Hospital Alumnæ Association.
The Toronto Western Hospital Alumnæ Association.
The Winnipeg General Hospital Alumnæ Association.
The Vancouver Graduate Nurses' Association.

TORONTO GENERAL HOSPITAL ALUMNÆ ASSOCIATION.

Officers, 1907-8: Hon. President, Miss Snively; President, Miss A. Muir, 505 Sherbourne St.; 1st Vice-President, Miss H. Fralick, 12 Selby St.; 2nd Vice-President, Miss M. Tweedie, 53 Langley Ave.; Treasurer, Miss Halbhaus, 12 Selby St.; Recording Secretary, Miss Mary Roberts, Grange Ave.; Corresponding Secretary, Miss Samson, 12 Selby St.; Directors: Miss Hall, Miss Burnett, Miss Crosby, 12 Selby St.

Conveners of Standing Committees: Sick Visiting, Miss Alice Stewart, General Hospital; Registration, Miss Lucy Bowerman, Sherbourne St.; Programme, Miss Ida Beam, Selby St.; Social, Miss Younger; Look-out, Miss Baldwin; Press and Publication, Miss M. E. Christie, 19 Classic Ave.; Representative of the Central Registry Board, Miss B. Crosby and Miss Purdy; THE CANADIAN NURSE Representative, Miss Frieze.

THE ALUMNÆ ASSOCIATION OF THE HOSPITAL FOR SICK CHILDREN TRAINING SCHOOL FOR NURSES, TORONTO.

Officers, 1907-08: Hon. President, Miss Brent; President, Miss Gowans, 5 Dupont St.; 1st Vice-President, Miss Barnard, 608 Church St.; 2nd Vice-President, Miss Ellrington, 15 Selby St.; Recording Secretary, Miss Cooper, 505 Sherbourne St.; Corresponding Secretary, Miss Robertson, 182 Walmer Road; Treasurer, Miss Mary Hill, 105 Roxborough St. East; Secretary of Invalid Cookery Book, Miss Mary Gray, 505 Sherbourne St.

General Business Committee: Convener, Miss Barbara Goodall, 666 Euclid Ave.; Miss Jenny Gray, Deer Park P.O.; Miss Bennett, 505 Sherbourne St.; Miss Kirkby, 266 Gerrard St.; Miss Adams, 85 Isabella St.; Directors, Miss Halley, 24 Elgin Ave.; Miss Leman, 20

Boswell Ave.; Miss Clark, 85 Isabella St.; Representatives to Central Registry, Miss Cooper, Miss J. Hamilton. Representative on Editorial Board of THE CANADIAN NURSE, Miss Hamilton.

Meetings are held on the second Thursday of the month in the Nurses' Residence at 3.00 p.m.

THE ALUMNÆ ASSOCIATION OF THE COLLINGWOOD GENERAL AND MARINE HOSPITAL TRAINING SCHOOL FOR NURSES.

Officers, 1907-8: President, Miss J. E. Carr; 1st Vice-President, Miss M. M. Redmond; 2nd Vice-President, Miss M. E. Knox; Secretary, Miss A. I. F. Morton; Assistant Secretary, Mrs. Isabel McBride; Treasurer, Miss J. Cottrill.

Sick Visiting Committee: Misses Dawson, Lord, and Moore.

The meetings are held on the first Thursday of the month at 3 p.m., in the Board Room of the hospital.

QUEEN ALEXANDRA'S IMPERIAL MILITARY NURSING SERVICE.

The following ladies have received appointments as Staff Nurses: Miss E. J. Barrow, Miss M. E. Jacob, Miss C. M. Pearce, Miss M. I. Taylor.

POSTINGS AND TRANSFERS.

Matrons.—Miss E. Ferguson, to M. Hp., Colchester, from South Africa.

Sisters.—Miss A. A. Wilson, to M. Hp., Middleburg, Cape Colony, S.A., from M. Hp., Pretoria; Miss F. M. Hodgins, to the Q. A. M. Hp., Millbank, London, from Hp., Aldershot; Miss L. M. Toller, to Hp., Aldershot, from Q. A. M. Hp., Millbank, London; Miss E. C. Stewart, to Hp., Aldershot, from South Africa; Miss H. Stuart, to M. Hp., Portsmouth, from Hp., Aldershot.

APPOINTMENTS CONFIRMED.

Staff Nurses.—Miss K. E. Hearn, Miss N. Parke, Miss E. K. Parker, Miss G. M. Bennet, Miss J. Connell.

C. H. KEER,
Matron-in-Chief, Q.A.I.M.N.S.

Correspondence

THE EDITOR THE CANADIAN NURSE:—

DEAR MADAM,—Did you ever get a letter from Paradise before? I venture to say not; so here is a little one now; but this is Paradise, Nova Scotia, and, since coming here, I can easily see why it was given this name. Paradise is in Annapolis County, and is the most charming spot in the world-famed Annapolis Valley. It lies between the North and South Mountains, just one mile from the foot of the South Mountain, and two miles from the North Mountain. The Paradise River curves in and out, and, at this season of the year, it is very full.

Just now I am writing this letter on the piazza, and the river is just a few yards from the garden that is in front of the piazza. Every person in Paradise has a fruit farm—nearly all apples—and I have become very much interested in apple culture, as I knew very little about it before.

My idea was that all one had to do was to plant the trees, and let Nature do the rest; but not so. The ground around the trees must be ploughed every spring, then harrowed, then manure and potash spread all over it, then harrowed again. In July the farmer sows clover, and in the fall this clover is ploughed into the ground.

Then the trees have to be pruned. Where the branches are cut off, the tree is painted to keep the sap in; and then comes the spraying, before the leaves come out. Every tree, from the root to the highest branch, is sprayed with a mixture of Paris green, one pound; blue vitriol, four pounds; lime, one bucket, to a forty-gallon cask of water. This spraying is done three times, once before the leaves come out, again when the blossoms are coming, and again just as the fruit is forming.

Then this is the season of grafting, and I really think this is very wonderful.

I shall return to the hospital before blossom time, but then I have passed through the valley several times, and know how beautiful it looks from the train.

I should like nothing better than remaining here all summer, but I must return to my work, which I am afraid I shall find very much behindhand.

Hoping my letter has not been too uninteresting, and that you are well.

Yours very sincerely,

M. R. M.

Paradise, Nova Scotia.

The Contributors' Club.

Examination Questions.

In the First Examination before the Nurses' Examining Board of the District of Columbia, Washington, D.C.

WRITTEN STATEMENT OF CARE OF FEVER PATIENTS.

1. Describe in full the daily routine care of a fever patient.
2. What means would you use to keep the room of a fever case in proper hygienic condition?
3. How often would you feed a patient with high fever, and of what should the diet consist?
4. What means would you use to reduce the temperature of a fever patient?
5. In typhoid cases what symptom would indicate the approach of hemorrhage from the bowels? What precaution would you use? Should hemorrhage actually occur, what would be your treatment while awaiting the arrival of the doctor?

Local Government Board, Scotland, Examination of Nurses, 1907.

MEDICAL AND SURGICAL NURSING.

Time, 3 hours (only six questions to be answered).

1. How are the pulse and temperature affected in (*a*) acute pneumonia, (*b*) acute Bright's disease, (*c*) cerebral hemorrhage, (*d*) septic wound, (*e*) acute peritonitis?
2. What are the signs of grave import in advanced disease of the mitral valve of the heart? What nursing and treatment are required in the circumstances?
3. In what conditions is it dangerous to administer purgative medicines? What symptoms would you observe in such cases?
4. What is the diet suitable for (*a*) ulcer of the stomach, (*b*) a case of diarrhea in a child of one year, (*c*) a case of diabetes mellitus, (*d*) for a person who has swallowed a sharp stone, (*e*) a case of scurvy?
5. What instruments, appliances and drugs would you place on the chloroformist's table, when preparing for a surgical operation?
6. Explain what is meant by treating a wound (1) on the aseptic, and (2) on the antiseptic principle.
7. What preparations would you make, and what instruments would you have ready in a case of pleural effusion which is to be drawn off?
8. Describe the instruments and other appliances required for excision of the elbow joint.

Spinal Anesthesia.

This new method of anæsthesia is one of the most interesting topics of discussion at the present time in the medical world. Introduced by Bier in 1899, and greatly improved by him in 1904, when cocain was replaced by stovaine, and adrenalin added to the solution, it is now a distinct help to the surgeon in cases unsuitable for general anæthesia. The method is not suitable for operations above the level of the umbilicus, and great precautions are taken to keep the fluid, which is injected into the spinal cord at or about the level of the third lumbar interspace, away from the medulla, and consequently the patient's head is always placed high.

At a recent special clinic at Toronto General Hospital, Dr. Bingham operated on two cases on whom spinal anæsthesia had been performed by Dr. Duncan Anderson, one of the Official Anæsthetists to the Hospital. These were respectively the ninth and tenth cases operated on by Dr. Bingham under spinal anæsthesia, and all successfully, so far, though the operator frankly admitted that he was looking for accidents. The death-rate of spinal anæsthesia is higher at present than the death-rate of chloroform, which is 1 in 4,000. In one of the cases shown, where the great toe of the left foot had to be operated on, Dr. Anderson was successful in anæsthetising the left leg only, the right leg retaining all its powers.

A PRAYER.

Whatever I have or may possess will suffice me, but not so as to science and art. Let never the thought arise in me, "I have of knowledge enough," but extend to me the power, the leisure, the burning desire to correct and adjust my accomplishments, and add to them steadily. Great is our art, but the power and extent of the human mind is also vast and its limitation unknowable. Further and further we advance, but in the science of yesterday we find errors to-day, and that of to-day will be questioned to-morrow.

Give me Thy gracious help and protection, O Lord, in the work to which I will go now, that it may prove a blessing to those who will be entrusted to my care.—*The Trio, from the Prayer of an Egyptian Physician.*

Hospital and Training School Department.

The Editorial Board beg to state that items for this Department will be welcome, and are published free of charge. Please send them at once, as soon as the events occur, addressed THE CANADIAN NURSE, Toronto, and they will be published as early as possible.

THE new maternity ward for the Chatham General Hospital was formally opened February 26th. It cost $11,000, and provides nine rooms.

THE V. G. N. A. have removed their Graduate Nurses' Registry from the "Victorian Order" to the West-end Hospital, Barclay Street, Vancouver, B.C.

THERE was a small but enthusiastic meeting of ladies at the Nurses' Home of the Toronto General Hospital, on Friday, April 3rd, when the plans for the "Fair of all Nations" were further perfected. On May 27th there will be another meeting, held at the residence of the H. S. C., when it is hoped that most of the ladies interested will be present, in order that everything may be put in good working form before the holidays.

A DEPUTATION from the hospitals of Ontario, about 100 strong, waited upon the Provincial Secretary and a number of his colleagues, on the 18th of March, to ask for an increase in the Government grant, on the ground of increased cost of maintenance. The grant last year was at the rate of 20 cents per patient per day, and the deputation suggested an increase to 30 cents per day. The Hon. Mr. Hanna promised that the matter would have due consideration.

THE delegation which waited upon the Government in reference to increased aid to hospitals subsequently organized "The Ontario Hospital Association." Mr. J. A. Hutcheson, K.C., of Brockville, was appointed secretary, and a committee of the delegates was named to appoint the other officers.

THE regular monthly meeting of the Registry Committee was held on Monday, April 6th. Members present, 8. Registrar's report showed members to number 254. Calls for March: Registry, 112; personal, 21. Savings Bank account, $500; current account, $46.15; on hand, $5.50. An important step was taken when the Committee unanimously carried the following: That the Registry Commitee form the nucleus of the Nurses' Library for the new club-house by buying "The History of Nursing," by Miss Nutting and Miss Dock, and that $5 be set aside monthly for the purchase of other volumes. Any contributions for the library, either in books or money, will be gratefully received.

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A Consumptive Hospital.—Brantford will erect a Consumptive Hospital this year. A promise of liberal support from the Government has been secured, augmented by handsome private subscriptions. The medical men of the city have the project in hand and, having made such good progress, they feel warranted in making a definite announcement concerning the prospects.

The Women's Home Missionary Society of the Presbyterian Church held their fifth annual meeting in Hamilton last month. Great stress was laid upon the hospital work among the foreigners, as well as Canadians. At Teulon, Wahan, Vegreville (Galician centres), hospitals have been established to meet the needs of these people. At Ethelbert and Lipon nurses have been installed, and good work is being done from the Mission Houses. Then, at Atlin, in the Yukon, the salaries of two nurses are paid by the W.H.M.S., the town paying the running expenses. Mrs. G. Anderson gave an account of the work of the Supply Committee, who attend to the furnishing and equipment of the hospitals. All kinds of clothing and comforts for the poor of the districts are also sent to the various mission centres.

The Toronto Hospital for Incurables, under the able management of the Superintendent, Miss M. M. Gray, is making good progress, as was shown at the recent graduating exercises, when an interesting and encouraging report was read by the Superintendent. A large audience was present, and among those who took part in the proceedings were His Honor the Lieutenant-Governor, Sir Mortimer Clark, and Lady Clark; the President, Mr. Ambrose Kent; the Rev. W. H. Hincks, D.D., and Dr. J. N. E. Brown, Medical Superintendent of Toronto General Hospital, who gave the address to the graduating class, taking as his subject "The need of the middle classes for trained nurses." Lady Mortimer Clark presented the class pins and diplomas to the graduates: Miss Fanny Scott, Camden East, Ont.; Miss Helen Forsyth, Banff, Scotland; Miss E. Mabel Johnson, Picton, Ont.; Miss Ella Fisher, Creekbank, Ont.; Miss Anna Maney, Niagara Falls, Ont.; Miss Effie Miller, Picton, Ont.; Miss Eleanor Doane, Barrie, Ont.; Miss Tillie Nixon, Toronto; Miss Mary Driscoll, Glenarm, Ont. The Millichamp gold medals for the highest standing were warded to Miss Helen Forsyth and Miss Fanny Scott. Silver medal for second standing, Miss E. Mabel Johnson. Medal for third standing, Miss Ethel Fisher. The medal for neatness and general executive ability was awarded to Miss Mary Driscoll; prize essay on massage, Miss Johnson; prize for practical application of massage, Miss Fisher. A pleasant reception followed the conclusion of the programme, at which the graduating class received many congratulations.

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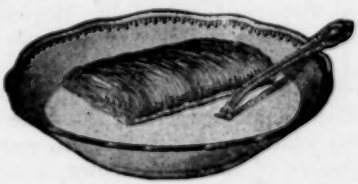

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THE following programme is announced for the Second Annual Convention of the Canadian Hospital Association, to be held in the Parliament Buildings, Toronto, on Easter Monday and Tuesday, April 20th and 21st, 1908:

Monday, April 20th, 2 p.m.—President's address, Miss L. C. Brent, Superintendent Hospital for Sick Children. "How to Deal with Tuberculosis as a Social Problem," Dr. W. J. Dobbie, Superintendent Weston Sanitarium; discussion by: Drs. Gordon and Kendall, of Gravenhurst, and Dr. Holbrook, Mountain Sanitarium, Hamilton. "The Milk Supply," Dr. Helen MacMurchy, Editor CANADIAN NURSE; discussion by: Dr. Robertson, of Ottawa. "Fumigation," Dr. A. D. Macintyre, Superintendent Kingston General Hospital; discussion by: Miss Miller, Lindsay. Appointment of Nominating Committee. 8 p.m.—Reception by Miss Louise C. Brent, President of Association, at the Nurses' Residence, Hospital for Sick Children.

Tuesday, April 21st, 9.30 a.m.—"Contagious Diseases in Relation to Hospital Management," Dr. Chas. Sheard, Medical Health Officer; discussion by: Miss Brent and Miss Matheson. "Some Observations on European Psychiatric Hospitals," Dr. C. K. Clarke, Superintendent Toronto Hospital for Insane; discussion by: Dr. Ryan, of Kingston, Dr. Hurd, of Johns Hopkins Hospital, Dr. R. Bruce Smith and Dr. D. C. Meyers. "The Hospital and the Public," Del. T. Sutton, Esq., Editor *National Hospital Record;* discussion by: J. W. Flavelle, Esq., LL.D., W. T. White, Esq., J. Ross Robertson, Esq., and J. W. Atkinson, Esq. Report of Nominating Committee. 2 p.m.—"A New Typhoid Hopper," H. E. Webster, Superintendent The Royal Victoria Hospital, Montreal. "The Nursing of Incurable Patients," Miss M. M. Grey, Superintendent Hospital for Incurables. "The Proper Length of the Period of Study for Nurses," Dr. H. M. Hurd, Superintendent Johns Hopkins Hospital, Baltimore; discussion by: Miss Patton, Miss Tolmie and Miss Chesley.

KINGSTON GENERAL HOSPITAL has just published its Sixty-third Annual Report, an attractive, illustrated booklet of some thirty-five pages, which is, in its interest, completeness and the progressive character of the work shown, a model of what such reports ought to be. The historical sketch, from which we take the following, is especially interesting: At the close of the war of 1812 a number of immigrants, with very little means of support, settled in Kingston and the vicinity. Their poverty led to an outbreak of disease among them. With the object of relieving this distress and suffering, a few citizens banded themselves together under the name of The Kingston Compassionate Society. The Society's work increased and in 1821 was taken over by the Female Benevolent Association, which in 1833 appealed to the Legislature of Upper Canada and obtained a grant of £3,000 towards the erection of a hospital. The contracts for the work were

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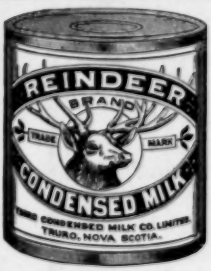

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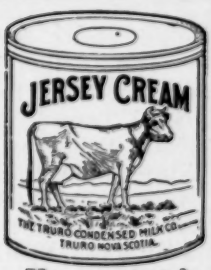

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let in 1833, and the building was completed in 1834, but owing to the lack of means the interior was unfinished until 1837, when a further grant of £500 was received from the Government. During the rebellion of 1837-8, Colonel Bonnycastle was instructed to procure a suitable building for a Military Hospital, and on his advice the building recently completed for a General Hospital was used for a Military Hospital from May, 1838, to June, 1839. In 1841, at the request of Lord Sydenham, the building was changed to some extent and the United Legislature of Canada met there until 1844. In this year the Female Benevolent Association received permission to send their sick poor to the Hospital, and a small grant was made by the Legislature for maintenance. The first meeting of the Board of Governors under the new charter was held November 5th, 1856, Sir John A. Macdonald being among the first Governors. Additions to the Hospital have been made at various times through the generosity of its benefactors. Mr. John Watkins gave the Watkins Wing in 1862. In 1890 Mr. William Nickle bequeathed $10,000 to the institution and the building for Infectious Diseases bearing his name was erected. The Doran Building for Obstetrical and Gynæcological work was erected in 1893 by bequest from Mr. Michael Doran. Dr. K. N. Fenwick in 1895 donated the Fenwick Operating Theatre and friends of the Hospital by subscriptions erected a much needed Nurses' Home in 1904. The Report of the Superintendent, Miss Alice J. Scott, is an excellent one, and records progress in many directions, especially in regard to the new course in Dietetics, conducted by Miss Susie Bawden, graduate of the Boston School of Cooking. The following graduates of the school received appointments during the year: Miss Veale (1895), Superintendent Cottage Hospital, Grand Forks, B.C.; Miss Beatty (1905), Night Supervisor Alexandra Hospital, Montreal; Miss Isabel Turner (1905), Head Nurse Bellevue and Allied Hospitals, Fordham, New York; Miss McCallum (1905), Head Nurse Alexandra Hospital, Montreal; Miss Bouck (1904), Head Nurse Bellevue and Allied Hospitals, Fordham, New York; Miss McIllroy (1905), Head Nurse Alexandra Hospital, Montreal; Miss Mabel MacDiarmid (1906), Assistant Delaware Hospital, Wilmington.

At the April meeting of the Alumnæ Association of the Toronto General Hospital, Dr. Helen MacMurchy spoke on "Registration from the Point of View of the Physician and the Public." The only one who loses by Registration is the untrained nurse, who now finds it comparatively easy by the wearing of a uniform to earn $15 a week without the trouble and expense of a course in a hospital. The British Medical Association, after obtaining reports from its branches throughout the Empire, has almost unanimously put itself on record as approving of Registration for nurses.

Victor-Berliner Vaudeville

How would you like to hear May Irwin, the queen of fun-makers, Vesta Victoria and Alice Lloyd, the famous English comediennes; that celebrated tenor, Richard Jose; clever Clarice Vance, with her irresistibly humorous song-hits; Harry Lauder, the great Scotch comedian; popular Eddie Morton, *in your own home?*

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Personals.

THE Editorial Board beg to state that items for this Department will be welcome and are published free of charge. Please send them at once, as soon as the events occur, addressed to THE CANADIAN NURSE, Toronto, and they will be published as early as possible.

MISS GILBY, grad. S. C. H. Hospital, will be second assistant in the Toronto Home.

MCCONACHIE.—On February 27th, to Mr. and Mrs. Geo. B. McConachie, of North Bay, a son.

Mrs. McConachie was Miss Ethel B. Arrell, graduate of Sick Children's Hospital, Toronto, Ont.

MISS M. A. MACKENZIE, B.A., has been appointed Chief Superintendent of the Victorian Order of Nurses.

MISS EVANS, who has been acting superintendent during Miss Eastwood's absence, will remain as her first assistant.

MISS HOLROYD, of Vancouver, has accepted the post of Matron in Dr. Kingston's Private Hospital, Grand Forks, B.C.

ST. JOHN, N.B., has had a third nurse added to its small staff and now offers to do night work. Miss Andrew has gone from Montreal for this purpose.

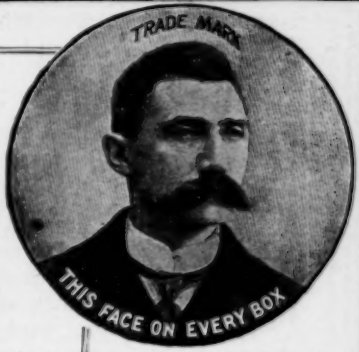
MISS MENZIES (T. G. H.), has resigned the position of Lady Superintendent in the Northern Pacific Hospital, Tacoma, and is staying at present in Vancouver, B.C.

MISS RACHEL MCLEOD (V. G. H.), late Nurse-in-charge of the Operating-room in the Northern Pacific Hospital, Tacoma, Wash., is engaged in private nursing in Vancouver.

ON March 11th Mrs. Thomas Evans, Guelph, quietly observed the fifth anniversary of her marriage. Mrs. Evans (nee Miss Sine Dyke) is a graduate of the Guelph General Hospital class, 1890.

MISS ISABEL TURNER, a graduate of Kingston General Hospital, resigned her position at Fordham Hospital, New York, to take charge of the private wards in the Woman's Hospital, New York City.

THE Nursing Sisterhood in Toronto has received a decided acquisition in the person of Miss Ebba Rydman, of Stockholm, Sweden, who is a graduate of Gotsborg Hospital, Sweden, where the training-school course is two years and the number of beds is about 150. Miss Rydman has had experience in private nursing in Sweden and intends to join the Toronto Central Registry of Nurses.



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Miss Eastwood, who has been in charge during the interim between Mrs. Smith's (Miss Allen) resignation and the Annual Meeting of the Board of Governors, has returned to her own work in Toronto.

Miss Maude Broddy, a graduate of Toronto General Hospital, and formerly Assistant Superintendent of Grace Hospital, Detroit, has been appointed Superintendent of the South Mississippi Infirmary at Hattiesburg, Mississippi, and took up her new duties there in January, 1908.

Miss Meagher, of Watertown, Ontario, a trained nurse practising in Chicago, died at the Nurses' Home on March 21st, from pneumonia, at the early age of 27. Miss Meagher was sent to Crevor, Wis., several weeks ago by Dr. A. R. Edwards to take charge of a patient with pneumonia. So assiduous was her care that he rapidly mended, but Miss Meagher was stricken a day after her charge was pronounced out of danger. She was hurried to Chicago, but every effort to save her life failed. The funeral took place at her old home in Watertown.

The Rutland Daily Herald, March 24, says: "The position of Superintendent of the Rutland Hospital, which became vacant in November last, has since been very satisfactorily filled by Miss Annie A. Aitken, the former night superintendent. Miss Aitken is a graduate of the Western Hospital, Montreal, and came to us well recommended. She is conscientiously devoted to her profession and her training and experience qualify her to do excellent service. The training school for nurses has been doing quiet but effective work and its members have shown good progress. Miss Aitken is the second daughter of the Rev. Wm. Aitken, of Newcastle, N.B., and the above notice will be read with much pleasure by her many friends here.

One of our good Canadian nurses is now a citizen of Paris and has made a place for herself in that great and gay world-centre. Miss Marie A. Tripp, who graduated from the Guelph General Hospital about ten years ago, and then took a Post-Graduate course at the General Memorial Hospital, in New York. Miss Tripp's present residence is 15 Rue Petrarque, in Paris, and she has residing with her, and under her charge, a number of young Canadian girls who are studying in Paris. Any of our friends who are going to paris or sending anyone there will be delighted to know of this. Miss Tripp's references in Toronto are Mrs. Broughall, of St. Stephen's Rectory, and Dr. Fenton, of Bloor Street.

We are indebted to the *Nurses' Alumnae Journal* for the following notes from Winnipeg and the West:

Miss Nicholson has taken charge of the Dauphin Hospital for three months.

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Miss Cobbe is at her home in Baldur, Man., and Miss Lawford at Kisbey, Sask.

Miss Jean Matheson has taken charge of the "Tranquille Sanatorium," Kamloops.

Miss Ada Ross has been appointed Lady Superintendent of the new Selkirk Hospital.

Miss Cotter has taken charge of the operating-room, W. G. H., in Miss Parlett's absence.

Miss Helen Stewart has been a patient in the hospital with rheumatism, but has now recovered.

Miss V. Eraut, who has been visiting in England, contemplates a post-graduate course at the Memorial Hospital, New York.

Miss Forrest, who is visiting in Ottawa at present, goes to Lethbridge next month to take charge of the operating-room there.

Miss McMillan, of the Fernie, B.C., Hospital, is with her sister in Calgary at present. Miss Cornett is filling the position during her absence.

Miss Annie Armstrong, Miss Taggart, Miss Aston and Miss Duncan have graduated. Miss Armstrong is visiting at her home in Lariviere, and Miss Duncan in Morden. Miss Taggart and Miss Aston are doing private work in Winnipeg.

At the last Alumnae meeting a motion was carried to send a letter of condolence to Mrs. Snider (nee Annie M. Brown), of Portage la Prairie. Mr. Snider died on February 4th, after a lingering illness.

At the residence of Mr. and Mrs. D. Ross, Cameron St. Cannington, a quiet wedding took place Tuesday afternoon, when their third daughter, Nellie, was married to Mr. G. Clondsley Brereton, M.D., C.M., of Carnduff, Sask., second son of Dr. and Mrs. C. Brereton, Bethany, Ont. The ceremony was conducted by Rev. W. Findley, the bride being assisted by her sister, Miss Florence Ross, and the groom supported by Captain J. A. Anderson.

Lukes—Jones.—At Dunn Avenue Methodist Church, Parkdale, by Rev. Wm. H. Hincks, Mary, fourth daughter of Benjamin Jones, Esq., London, England, to Samuel Gilbert Lukes, eldest son of Samuel Lukes, Esq., Bradford, Ont.

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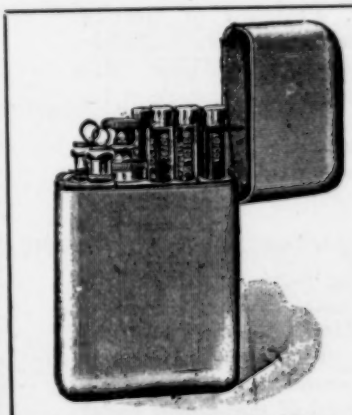

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The Easter number of *The Canadian Pictorial* is a beautiful one, with its pictures of the faces of great Canadians and of famous scenes in Canada as well as home pictures. It is just the same subscription price as THE CANADIAN NURSE, and is well worth the money and more. Send it to your friend abroad after you have read it.

Messrs. Whitcourt & Barrows have published a color-chart, or "Register of Foods," prepared by Dr. Goldsbury. It is printed on heavy card, about 1 ft. x 1 1-2 ft., and is, we think, both easily remembered and useful for reference. Teachers of dietetics will be pleased with it.

Wellcome's Professional Nurses' Diary is not only a convenient and suitable diary, but a book containing excellent notes as to emergencies, drugs, measures, baths, poisons, midwifery, etc., etc. It is illustrated by those historical pictures of nurses and nursing and other medical pictures which Messrs. Burroughs Wellcome & Co. have done so much to make known to the professional reader.

The Report of the Commissioner of Education at Washington contains a chapter on the Education and Professional Position of Nurses, by Miss M. Adelaide Nutting, Professor of Hospital Economics in Columbia University. Besides Miss Nutting's own contribution, Miss Gilmour, Miss Drown, Miss Alline, Miss Riddle and Miss Noyes are each responsible for an article of importance. The fact that such an article appears in the Commissioner's Report is a great step in advance, and we can confidently say that nothing equal to it as an authoritative historical statement has yet appeared.

The Visiting Nurse Association of Chicago publishes its Annual Report for 1907, a book of forty pages or more. This Association does a very great work. The staff of nurses numbers thirty, under the able Superintendent, Miss Fulmer, whose name is a household word in the profession. The nurses have made about 100,000 visits in the year and cared for about 15,000 patients. Miss Fulmer's Report is a record of the highest social service.

The Nurses' Alumnae Journal of the Winnipeg General Hospital presents an interesting number as the first of its second volume. Miss Johns contributes a clear and well-informed article on the nurse in fiction. "What we need," as she truly says, "is

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a prophet from our own country, who will write from the inside." Every page in the magazine is good, but page two touches our heart, for it contains a kind notice of THE CANADIAN NURSE.

Alice-for-Short. WILLIAM DE MORGAN. Toronto: Henry Frowde.

This is the very book to read in "a long case." It is long, and pleasant and human, and many vastly interesting things do happen in it, especially ghosts. There is a little of everything and everybody in it, including doctors, nurses, and artists—nearly all nice people and no very bad ghosts. It is one of the books best worth reading at present.

Outlines of Psychiatry. By PROFESSOR WILLIAM A. WHITE. New York: The Journal of Nervous and Mental Disease Publishing Co.

This is the first of the series of mongraphs on nervous and mental disease, edited by Dr. Smith Ely Jelliffe and Dr. W. A. White. This monograph, which is a model one, is not, of course, intended to replace standard works on this subject, but rather to be a guide to the student. The chapters on Treatment and on the Care and Examination of Insane Patients will be of great service to nurses who are in charge of such patients.

Minor Medicine. WALTER ESSEX WYNTER, M.B., B.S., F.R.C.P., F.R.C.S. London: Sidney Appleton.

This book is worth much. It will be perfectly invaluable to those who are expected, as nurses are, to give sensible answers to a great many questions of personal health, from cracked lips to seasickness. As a book of reference in a nurse's library, it will fill a place of its own that no other book, so far as we know, can fill anything like as well. It is clearly and interestingly written and contains in small space a mine of useful information.

The Science and Art of Prescribing. By E. H. COLBECK, M.D., F.R.C.P., D.P.H., and Arnold Chaplin, M.D., D.P.H. London: Henry Kimpton.

This is the 2nd (revised and enlarged) edition of a book at once useful and complete. Nurses who are required to learn much materia medica, or who have anything to do with dispensary work, will find this a good reference book. There are, of course, many pages on prescribing proper which will not interest them, but, after all, there are not many books which we use every part of.

The Production and Handling of Clean Milk. By KENELM WINSLOW, M.D., M.D.V., B.A.S. (Harv.) $2.50. William R. Jenkins Co., 851 and 853 Sixth Avenue, New York.

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